Iowa Retirement Investors' Club (RIC)
457/401a Plans
Look *forward* to retirement!

Harlan Municipal Utilities
RIC Account Form

HARLAN MUNICIPAL UTILITIES
TELECOMMUNICATIONS ELECTRIC GAS WATER

Personal Information

Name _____ Social Security # _____

Address _____ City _____ State_____ Zip_____

Birth Date _____ Telephone (daytime) _____ Telephone (home) _____

457 Payroll Deduction

Designate the deduction amount to send to your provider. *The combined amount of all 457 contributions in a tax year is limited to the IRS annually declared maximum contribution limits.*

	Pretax	Roth (post-tax)
MassMutual	$ _____ /check	$ _____ /check
VALIC	$ _____ /check	$ _____ /check
Voya	$ _____ /check	$ _____ /check

Effective date. *Deduction changes will take Effect the month after your request is received. You may elect a future date or specify a single check below.*

Future effective date (if desired)

- ☐ Begin as of _____ (check date)
- ☐ 1 check only _____ (check date)
- ☐ Final check _____ (check date)

Provider Changes

Designate the amount of existing assets to transfer. *You must have established an account with the receiving provider to complete a transfer.*

Please transfer:	From:	To:
☐ 100%	☐ MassMutual	☐ MassMutual
☐ $_____	☐ VALIC	☐ VALIC
	☐ Voya	☐ Voya
	☐ _____	

Designate the redirection of future contributions. *You must have established an account with the receiving provider.*

Stop contributions to:	Redirect contributions to:
☐ MassMutual	☐ MassMutual
☐ VALIC	☐ VALIC
☐ Voya	☐ Voya

Participant Signature

I authorize my employer to direct my contributions and make payroll deductions as indicated above. I understand and agree to the terms and conditions of the Iowa Retirement Investors' Club (RIC). I have access to a RIC At-A-Glance and Plan Document. I have established 457 and 401a accounts with one of the RIC providers. I understand that withdrawals may only be made upon termination of employment or qualification for an in-service distribution. I understand that the total of all 457 contributions made in the calendar year may not exceed the federal limits as required by the Internal Revenue Code section 457b.

X_____

Participant Signature Date

Form Submission

New Accounts:	**Provider account forms:**	Forward to the provider
	RIC Account Form:	Forward to your payroll office
Changes to Existing Accounts:	Forward this form to your payroll office (shown below)	

Agent Use Only *(Not required for existing accounts or online provider enrollment, if available)*

I am authorized to open accounts for this employee and verify that he/she has established 457/401a accounts with the provider shown below.

_____

Print Agent Name | Agent Signature | Agent Phone Number | Provider Name | Date

Payroll Office

Date Received: _____ Paycheck Effective Date:_____ Name: _____

RIC Use Only

Date Pended: _____ Entered: _____ Checked: _____

Visit the RIC website at https://das.iowa.gov/RIC to access the RIC At-A-Glance (under *Providers & Investments*), IRS maximum contribution limits, and other plan options specific to the Iowa RIC 457/401a plans.

Harlan Municipal Utilities
2412 Southwest Avenue, PO Box 71 ▪ Harlan, IA 51537 ▪ 712-755-5182 ▪ (fax) 712-755-2320
Iowa Retirement Investors' Club (RIC) ▪ 866-460-4692 (toll free) ▪ https://das.iowa.gov/RIC

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